

# Travel Emergency Exercise

USHA

Universities
Safety and Health
Association



### Objectives



Assess our HEI's current travel safety processes and identify opportunities for improvements



Learn how other institutions approach travel safety and travel emergency response



Build on links between HEBCoN and USHA



Inform direction of USHA
Travel Safety Working Group



## Timings

Phase	Time	Timings
Introduction	15:45	5 mins
Inject One	15:50	10 + 10 mins
Inject Two	16:10	10 + 15 mins
Inject Three	16:35	15 + 15 mins
Plenary	17:05	10 mins
End Ex	17:15	

### Scenario Begins - The Trip

- Mr Ola, a 55-year-old Nigerian Professor of Chemistry with Jupiter University, has lived in the UK for over 25 years and has dual nationality.
- He is travelling to the University of Lagos to present a paper at a conference. The trip is five days, Thursday to Monday, with sightseeing for the last two days.
- A pre-travel risk assessment was completed following the travel approval process.
   As travel was to his home country, he did not read the country risk advice.
- The risk assessment was completed quickly and speedily approved to ensure he could secure a cheaper flight rate. His ticket is booked against his UK passport.
- After he left, a colleague mentioned he has a history of Ischemic heart disease, which has been well-managed. Upon checking, this had not been reported on his risk assessment.



#### Discussion Points

- Does your insurance policy require disclosure of health conditions?
- How do you encourage staff to disclose relevant individual risk factors?
- Does your travel approval process ensure pre-travel risk assessments have been completed?
- What training and guidance is provided to travellers & managers?
- How does your organisation ensure pre-travel risk assessments are suitable and sufficient and have been approved appropriately?



### Feedback



#### Scenario Continues - Arrival

- Upon arrival in Lagos, Mr Ola got an Uber to his hotel, which was also the venue for the conference.
- He checked in with his manager on arrival on Thursday, as agreed, and said he was planning to take a 45-minute flight to Port Harcourt for the last 2 days of his trip to visit his sister instead of sightseeing.
- There have been no further check-ins since Thursday evening.



#### Discussion Points

- What action would be taken at this stage?
- Do you have a procedure for maintaining contact with travellers?
   Is this procedure understood and followed?
- Does your organisation provide country risk information that includes differences between regions?
- Would the change of location or leisure travel element invalidate your insurance cover?
- What is the university position on changes to itineraries?
- Do you have visibility over the location of all travellers and would this update for mid-trip changes of itinerary?



### Feedback



#### Scenario Continues

- Having not heard from her brother, his sister contacted the switchboard at 16:55 yesterday to say he had not arrived.
- The switchboard operator emailed the travel team inbox who read the message at 08:00 this morning.
- His sister has now confirmed he was robbed at a checkpoint by a gang disguised as security services. He initially resisted but ultimately had his wallet, passport, money, phone, and laptop taken at gunpoint.
- Following this, he began to exhibit signs of a heart attack, upon which the gang fled, and his taxi driver took him to the nearest hospital. She is asking for help as the hospital won't provide care until they are paid.



#### **Discussion Points**

- Does your organisation have a 24/7 contact point? Would other relevant teams know what information to capture and where to pass reports (e.g. switchboard, security)?
- Are your travellers aware of how and when to seek help whilst away?
- Would your organisation be informed if a traveller sought help direct from your insurer?
- Do you have a mechanism for ground support and making payments in-country?
- Do you have a process for contacting & supporting family in the event of emergencies?
- What internal escalation/command & control would this scenario trigger and what is your response?
- What are the possible implications for the HEI if his condition deteriorates?
- ALL: How would the response differ for a high-profile or multiple casualty incident?



### Feedback



### Plenary

- Key learning points
- Do you have a route to feed into your travel management programme to learn and improve for future trips?
- USHA Travel Safety Group
- HEBCoN Webinar Series
- Thanks for your participation

